

Two Session Counseling Protocol: Session I [All Participants]

| Protocol Component | Time-Minutes |
|--|---------------------|
| Introductions and Orientation to the Session | |
| Enhancement of Patient's Self-Perception of Risk | |
| Explore the Specifics of Most Recent Risk Incident | |
| Review Previous Risk Reduction Experiences | |
| Synthesis of Risk Incident and Risk Pattern | |
| Negotiate Risk Reduction Plan | |
| Identify Sources of Support and Provide Additional Referrals | |
| Provide Appointment Card/Reminder for Follow-up | |
| Total Time | 30 |

Introductions and Orientation to the Session

Introduce self to client

Hello, my name is _____. I'll be talking with you today about what brought you to the clinic and your HIV/hepatitis concerns.

Explain role of counselor

My role as your counselor is to work together with you to identify your HIV and hepatitis risks and to explore issues related to these risks.

Indicate the duration of the session (approximately 20 minutes)

We'll talk together for about 20 minutes.

Outline content of session

Exploration of HIV/hepatitis risks

As I indicated we will talk about your risk for HIV and hepatitis.

Identification of challenges to RR

We will look at how you have tried to reduce your risk.

Discuss strategies to reduce risk

We will talk about changes you could make to further reduce your risk and develop a plan to do this.

Provide referrals

Sometimes we have referrals to services to help with this process of reducing your risk.

Address immediate questions and concerns

Before we go any further, do you have any concerns or questions you need to talk about right now?

Enhancement of Patient's Self-Perception of Risk

Review hepatitis A,B, and C

Use tool provided to explain risks

Discuss client's perception of their risk

What makes you believe you may have HIV? What makes you believe you may have hepatitis?

Listen for and identify behaviors that are putting the patient at risk for HIV and hepatitis A, B, and C

Have you ever been tested for HIV or hepatitis before because you believed you were at risk?

Direct patient's attention toward risk behavior

Do you inject drugs?

If yes: Tell me what a safe injection means to you?

Do you practice safer sex?

If yes: Tell me what safer sex means to you.

What have you done that you think may have put you at risk for HIV infection?

What have you done that you think may have put you at risk for hepatitis?

Assess patient's level of concern about having/acquiring HIV and hepatitis

When you inject and you share equipment, have you thought that you may be exposing yourself to HIV, hepatitis B, and hepatitis C?

When you have unprotected sex, have you thought you may be exposing yourself to HIV?

Discuss patient's HIV/hepatitis test history and behavioral changes in response to results

Have you ever been tested for HIV/hepatitis before?

If yes, what was that experience like for you? Did the counseling or test results affect how you feel about HIV or hepatitis?

Assess if patient is engaging in risky behavior because of previous HIV/hepatitis negative test results

When you tested before, how did getting the negative results influence your risk behavior?

Continued on back ↩

Enhancement of Patient's Self-Perception of Risk

(continued)

Identify and address examples when patient's beliefs and behavior are at odds or examples of mixed feelings about risk reduction

It seems you're concerned about HIV and hepatitis, yet continue to share works, which is how you would get HIV and hepatitis.

Help me understand that. OR

It seems you're concerned about HIV and hepatitis, yet continue to have unprotected sex, which is how you would get HIV, hepatitis, and

Other STDs. Help me to understand that.

There are better treatments now for HIV, but there is no cure for it. Once people have it, they have it for the rest of their lives.

Hepatitis B and C can cause serious liver damage.

There is a vaccination (shot) available to prevent you from getting infected with hepatitis A and B. There is no shot against hepatitis C.

Explore the Specifics of Most Recent Risk Incident

Explore the who, what, where, when, how of most recent risk exposure

Tell me about the last experience that you feel may have put you at risk for HIV or hepatitis?

Or, Tell me about the last time you shared needles or had unprotected sex.

Assess level of risk acceptable to the patient

Was this an unusual situation or is this common for you?

Was this exposure with someone you knew?

Tell me a little about your partner. How did you meet this person? Where did you go to shoot drugs/have sex? How did you decide to have sex/shoot drugs

Assess communication about HIV/hepatitis with partners

Did you talk about HIV and hepatitis risk or if either of you had been tested?

Did you have any concerns about having sex or shooting drugs with this person?

Could this person have had HIV or hepatitis?

Identify circumstances or situations that contribute(d) to risk behavior

What do you think kept you from protecting yourself at that time?

Had you been drinking or dope sick at the time of this exposure?

Identify vulnerabilities and triggers to the risk behavior incident

Was there or /is there anything going on in your life that could be increasing your risk behavior?

Assess patient's patterns of risk behavior (chronic, episodic, incident)

Are there times when you are more likely to take risks (not use a condom, share needles, works, etc..)?

When is the last time, before this situation, that you had a similar risky exposure? Was there anything similar about the circumstance? How often does this happen?

Identify and address examples when beliefs and behavior are at odds or examples when feelings are mixed about risk reduction

Would you have engaged in the same behavior had you known this person had HIV/hepatitis? Would knowing have made a difference?

Review Previous Risk Reduction Experiences

Identify successful attempts at practicing safer sex

Is there a specific time you remember when you talked to one of your shooting partners about not sharing because of disease risk?

Can you tell me about that time? How was that for you?

Is there a specific time you remember when you practiced safer sex? Can you tell me about that time? How was that for you?

Identify obstacles to risk reduction

What has been the most difficult part of reducing your HIV/hepatitis risk?

Explore triggers/situations which increase the likelihood of high risk behavior

Do drugs and alcohol, or being dope sick affect you're sharing of needles, syringes, works, etc... when shooting drugs? If yes: Tell me about that.

Do drugs and alcohol affect your having high-risk sex? If yes: Tell me about that.

Are there times in your life (feeling depressed, being unemployed, recently broken-up with someone) that you feel it has been more difficult to practice safer sex, to protect yourself?

Explore patient's communication with friends/partners about risk

With which partners do you find it most difficult to not share drug equipment? OR With which partners do you find it most difficult to use a condom?

Are there particular situations or people where you find it difficult to negotiate or ask to not share drug equipment or have safer sex?

Do you talk to your partners/friends about HIV/hepatitis concerns?

When HIV/hepatitis risk reduction has come up with a drug shooting or sex partner, how did the discussion go? How did you feel about it?

Discuss what patient's level of acceptable risk may be

What drug using activities do you feel comfortable with in terms of limiting your level of risk of getting HIV or hepatitis? OR

What sexual activities do you feel comfortable with in terms of limiting your level of risk of getting HIV or hepatitis?

Identify and address examples when patient's beliefs and behavior are at odds or examples when feelings are mixed about RR

The activities you say you feel comfortable with involve some risk of becoming infected with HIV or hepatitis. But you've said that you're concerned about HIV and hepatitis. Tell me about that.

Synthesis of Risk Incident and Risk Pattern

Summarize the information the patient has provided

Here's how I understand your situation concerning risks for HIV/hepatitis. (Summarize the key issues provided by the patient)

Is this how you see your risk behavior? Are there other issues we need to talk about?

Place risk behavior in the larger context of patient's life

You've been able to protect yourself when (list circumstances which help patient reduce risk).

Provide feedback to patient concerning his/her risk for HIV/hepatitis?

There are several issues that affect your risk behavior (list specific behavioral, communication, substance use issues).

Note any pattern of risk behavior

Let's look at how often these risk situations happen.

Identify key triggers/vulnerabilities

Given what we have talked about, what do you think makes it most likely that you will put yourself at risk for and HIV and hepatitis?

Convey concern and urgency about patient's risks (as appropriate)

It seems that unless these issues are addressed, you'll continue to engage in high-risk behavior and may become infected with HIV and hepatitis B & C.

Address examples when patient's beliefs and behavior are at odds or when feelings are mixed about changing behavior

It seems there's a level of risk you're comfortable with. At the same time, you say you would find it devastating to become infected with HIV or hepatitis. Can you help me understand this?

Encourage and support the patient in addressing risk issues

Coming to the outreach center, getting tested, and participating in this project are the first steps in addressing your risk behavior

Negotiate Risk Reduction Plan

Explore behavior(s) that the patient will be most motivated about/capable of changing

How would you most like to reduce your risk for HIV/hepatitis?

Is there something that you feel is reasonable for you to do to reduce your risk?

If the patient selects a radical “always” or “never” behavior change: It’s great that you really want to eliminate your risk. We know that change usually occurs in small steps. What would be the first step in reaching this goal?

Identify a reasonable yet challenging incremental step toward changing the identified behavior

Can you think of some small step that you could complete in the next week that would move you closer to reducing your HIV/hepatitis risk?

Break down the risk reduction action into specific and concrete steps

Now that you’ve identified something you would like to do, tell me how you feel you could go about making this happen.

When do you think you could do this?

Identify supports or barriers to the risk reduction step

What could make it more difficult for you to complete this step?

What could help make it easier for you? Who would be supportive of you in trying this?

If you are able to complete this step, how do you think it would make you feel?

Problem-solve issues concerning the plan

How will you handle it if something (specify) gets in the way of your trying this plan?

Let’s role-play how you will handle this.

Confirm with the patient that the plan is reasonable and acceptable

Now that you’re comfortable with the plan, does it seem realistic to you?

You will really have done something good for yourself by trying out this plan.

Continued on back ↩

Negotiate Risk Reduction Plan**(continued)****Acknowledge that the plan is a challenge and that there will be an opportunity to review it in the posttest session.***We'll review the plan in the next session. It's a challenge, so we may need to change it a bit.***Ask the patient to try to be aware of strengths and weaknesses in the plan while trying it out***Try to notice what works and what doesn't work for you about the plan.***Document the risk reduction plan with a copy to counselor***Let's write down your plan on this appointment card so you will have a copy of the specific details of the plan.*

Identifying Sources of Support and Provide Additional Referrals

Assess patient's support system

Who in your life do you feel is supportive of you?

Is there someone that you feel you can talk to about your feelings and concerns?

Do you have people you spend time with? Are these people who you feel close to?

Address the longstanding or tough to manage issues contributing to risk

Your plan seems really good. But there are some important issues that contribute to your risk that may be best addressed with professional help or assistance.

Assess the patient's willingness to seek professional help, use a referral

Have you ever sought counseling or gone to a support group?

Would you be interested in getting a referral for services to deal with this issue?

Evaluate what types of referral the patient would be most receptive to

Would you be more comfortable talking to an individual counselor, or going to a support group?

Since we've talked about (drug use, alcohol) affecting your risk, have you considered getting help in dealing with this?

What would be hardest about seeking support for (name the issue)?

Is there a particular type of support or service you would be willing to consider using?

Would you like to get the hepatitis A and B vaccinations today? I can provide you with a referral for those as well.

Recognize the challenges of behavior change

Changing behavior takes time and practice. Be patient with yourself. This is challenging, take it on in small steps. A small change is the beginning of larger changes.

Provide appropriate referrals

Here is the (name) and phone number of the service you should call to get assistance. When do you think you could call or go there?

Provide Appointment Card/Reminder for follow-up

Review with the patient the importance of getting test results

Now we need to schedule an appointment for you to come back in 2 weeks to get your test results.

Identify ways for the patient to remember follow-up events

What would help you remember and keep these appointments? Do you keep a date book or calendar?

Review patient and counselor contact information

Your next appointment is (day/date/time).

Let me just make sure that you know how to contact me should you need to talk with me.

Let me be sure I know how to reach you (review phone number/address).

Is this a good way to contact you?

Two Session Counseling Protocol: Session II [HCV+, HIV-]

| Protocol Component | Time-Minutes |
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| Provide Test Results Review | |
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| Review Risk Reduction Plan | |
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| Revise Risk Reduction Plan | |
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Provide Test Results - HIV Negative

Welcome Back Client

Provide results clearly and simply

Let's look at your test result, and then we'll talk about how best to understand the result.

The test result is negative for HIV, which means you have not been infected with HIV.

Review meaning of the results

This means that as of less than 3 months ago, which would be before (month), you were not infected with HIV.

However, this result does not tell us about any exposure you may have had in the past 3 months.

Assess patient's reaction to results

How does it feel to hear that it is very likely that you are not infected with HIV?

What does this result mean to you?

Note the need to consider the test result in reference to most recent risk exposure

Given you had an exposure last week (insert exposure here, sharing needles) you may want to consider another test in the next six weeks, by (date).

Is this something you want to do, get tested again? Where would you go for this?

Provide Test Results - HCV Positive

Provide results clearly and simply

Let's look at your test result, and then we'll talk about how best to understand the result.

The HCV test result is positive, which means you have been infected with the hepatitis C virus.

Review meaning of the results

HCV is a virus that affects the liver. For some people HCV is very serious, other may not get sick for many years. Now that you know you have HCV, there are several things you can do to protect your liver from harm. We'll talk about some of those in a minute.

Before you leave today I will give you a name of a health care provider who can do further tests to tell you if the virus has affected the function of your liver.

Before you leave I will give you the name of a health care worker who can provide further tests and tell you how your liver is doing.

Assess patient's reaction to results

How does it feel to hear that you are infected with hepatitis C? What does this result mean to you?

Note the need to consider the test result in reference to most recent risk exposure

Given you had an exposure last week (insert exposure here, sharing needles) you may want to consider another test in the next six weeks, by (date).

Is this something you want to do, get tested again? Where would you go for this?

Some things you should know since you have HCV -(may provide pamphlet if not enough time to go over)

People with HCV should not drink alcohol. If you can't stop drinking you should try to limit the amount of alcohol that you drink.

Taking certain medications can cause liver damage

You should get vaccinated against hepatitis A, and B

HCV is not spread by sneezing, hugging, coughing, sharing eating utensils or drinking glasses, or casual contact

Person's with HCV infection should not be excluded from work, school, play, child-care or other setting on the basis of their HCV status.

To reduce the risk of transmitting HCV to others

Do not donate blood, body organs, other tissue or semen, and Cover cuts and sores on the skin

Do not share items that may have blood on them, injection drug equipment(works), razors, toothbrushes, etc

Review the Risk Reduction Plan

Assess the patient's process in trying out the risk reduction plan

What were your thoughts or reactions to last week's session?

How was it for you to wait for the results?

In the last session we discussed some of your risks for HIV and hepatitis , which were. . .

We came up with a risk reduction step for you to try before today's clinic visit. How did that go for you?

How did the action you took feel for you?

Were you comfortable with how it went?

Identify supports and barriers to the risk reduction step

What parts of the plan worked best?

Which parts of the plan were challenging?

What stopped you? What made it difficult?

What were you feeling/thinking?

What would make it easier for you?

If it didn't work, where did you have trouble?

Problem-solve issues concerning the plan

Let's talk about what you would do if something got in your way of completing the plan. What would be a good back-up plan?

Provide encouragement and support for patient's risk reduction efforts

As appropriate:

Sounds like you did a great job.

It's great you were able to do that.

I'm impressed with how you handled that.

You've really accomplished something for yourself.

Making a change takes time, it is great that you set a goal for yourself, that is the first step, lets see where you went wrong and try another approach

Revise Risk Reduction Plan

Revise and develop a new plan with the patient

What else could you try to further reduce your risk of getting HIV and hepatitis?

Now that you have your negative test result, what can you do to stay uninfected?

You did an excellent job with the first risk reduction plan. What more do you think you can do?

Identify challenging step or revise previous step

Remember trying to change a behavior is difficult and is best addressed in small steps.

Identify/clarify actions toward achieving step

Lets look at the issues that needed to be addressed to reduce your risk and complete your plan (list).

What do you need to do first, second, third?

Identify support for achieving step

Who can help support you as you try to reduce your risk?

Confirm with the patient that the plan is reasonable and acceptable

Now is this something you really feel you can do?

You need to feel like it will work for you. How does it feel? If we need to we can rework the plan.

Document the revised risk reduction plan with a copy to the patient

Just like before, we will write your plan down on the appointment card, we will include all the steps and actions needed to complete the plan.

Sometimes, looking at the plan can help you remember the steps, and help you see yourself completing the plan.

Identifying Sources of Support and Provide Additional Referrals

Address the longstanding or hard to manage issues contributing to risk

Your plan seems really good. But there are some important issues that contribute to your risk that may be best addressed with professional help or assistance.

Assess the patient's willingness to seek professional help and use a referral

Have you ever sought counseling or gone to a support group?

Evaluate what types of referral the patient would be most receptive to

Would you be more comfortable talking to an individual counselor, or going to a support group?

Since we've talked about (drug use, alcohol) affecting your risk, have you considered getting help in dealing with this?

What would be hardest about seeking support for (name the issue)?

Is there a particular type of support or service you would be willing to consider using?

Recognize the challenges of behavior change

As we discussed, this may be challenging.

Trying something new can sometimes feel a bit uncomfortable but it gets easier, feels more natural with practice.

Provide appropriate referrals

We talked about an agency (name) that you could call to receive help with (name) the issue that is contributing to your risk behavior.

Do you feel comfortable doing this? Are there any questions I can answer?

Provide Appointment Card/Reminder for follow-up

Review with the patient the importance of getting test results

Now we need to schedule an appointment for you to come back in 2 weeks to get your test results.

Identify mechanisms for the patient to remember follow-up events

What would help you remember and keep these appointments?

Do you keep a date book or calendar?

Review patient and counselor contact information

Your next appointment with us is (day/date/time).

Let me just make sure that you know how to contact me should your need to.

Let me be sure I know how to reach you (review address/phone number).

Is this a good way to contact you?

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Provide Test Results- HCV Negative

Welcome Back Client

Provide results clearly and simply

Let's look at your test result, and then we'll talk about how best to understand the result.

The test result is negative for hepatitis C, which means you have not been infected with hepatitis C.

Review meaning of the results ????

This means that as of less than 3 months ago, which would be before (month), you were not infected with hepatitis C.

However, this result does not tell us about any exposure you may have had in the past 3 months.

Assess patient's reaction to results

How does it feel to hear that it is very likely that you are not infected with hepatitis C?

What does this result mean to you?

Note the need to consider the test result in reference to most recent risk exposure

Given you had an exposure last week (insert exposure here, sharing needles) you may want to consider another test in the next six weeks, by (date).

Is this something you want to do, get tested again? Where would you go for this?

Provide Test Results - HIV Positive

Provide results clearly and simply

Let's look at your test result, and then we'll talk about how best to understand the result.

The HIV test result is positive, which means you have been infected with HIV.

Review meaning of the results

Given what we've discussed about your potential exposures to HIV, this result accurately reflects whether you are infected with HIV.

Allow patient time to absorb the meaning of the result

Take your time, we have plenty of time to talk about the results

Explore patient's understanding and coping of the result

What does this result mean to you?

How are you feeling about this result?

Acknowledge the challenges of dealing with a positive result and provide appropriate support

It can be difficult finding out you have HIV. How are you doing?

Who can be supportive of you in dealing with this?

Answer any questions the client may have

Do you have any questions about this result?

Review the Risk Reduction Plan

Assess the patient's process in trying out the risk reduction plan

What were your thoughts or reactions to last week's session?

How was it for you to wait for the results?

In the last session we discussed some of your risks for HIV and hepatitis ,which were. . .

We came up with a risk reduction step for you to try before today's clinic visit. How did that go for you?

How did the action you took feel for you?

Were you comfortable with how it went?

Identify supports and barriers to the risk reduction step

What parts of the plan worked best?

Which parts of the plan were challenging?

What stopped you? What made it difficult?

What were you feeling/thinking?

What would make it easier for you?

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Provide Test Results - HCV Positive

Provide results clearly and simply

Let's look at your test result, and then we'll talk about how best to understand the result.

The HCV test result is positive, which means you have been infected with the hepatitis C virus.

Review meaning of the results

HCV is a virus that affects the liver. For some people HCV is very serious, other may not get sick for many years. Now that you know you have HCV, there are several things you can do to protect your liver from harm. We'll talk about some of those in a minute.

Before you leave today I will give you a name of a health care provider who can do further tests to tell you if the virus has affected the function of your liver.

Before you leave I will give you the name of a health care worker who can provide further tests and tell you how your liver is doing.

Assess patient's reaction to results

How does it feel to hear that you are infected with hepatitis C? What does this result mean to you?

Note the need to consider the test result in reference to most recent risk exposure

Given you had an exposure last week (insert exposure here, sharing needles) you may want to consider another test in the next six weeks, by (date).

Is this something you want to do, get tested again? Where would you go for this?

Some things you should know since you have HCV -(may provide pamphlet if not enough time to go over)

People with HCV should not drink alcohol. If you can't stop drinking you should try to limit the amount of alcohol that you drink.

Taking certain medications can cause liver damage

You should get vaccinated against hepatitis A, and B

HCV is not spread by sneezing, hugging, coughing, sharing eating utensils or drinking glasses, or casual contact

Person's with HCV infection should not be excluded from work, school, play, child-care or other setting on the basis of their HCV status.

To reduce the risk of transmitting HCV to others

Do not donate blood, body organs, other tissue or semen, and Cover cuts and sores on the skin

Do not share items that may have blood on them, injection drug equipment(works), razors, toothbrushes, etc

Provide Test Results - HIV Positive

Provide results clearly and simply

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The HIV test result is positive, which means you have been infected with HIV.

Review meaning of the results

Given what we've discussed about your potential exposures to HIV, this result accurately reflects whether you are infected with HIV.

Allow patient time to absorb the meaning of the result

Take your time, we have plenty of time to talk about the results

Explore patient's understanding and coping of the result

What does this result mean to you?

How are you feeling about this result?

Acknowledge the challenges of dealing with a positive result and provide appropriate support

It can be difficult finding out you have HIV. How are you doing?

Who can be supportive of you in dealing with this?

Answer any questions the client may have

Do you have any questions about this result?

Review the Risk Reduction Plan

Assess the patient's process in trying out the risk reduction plan

What were your thoughts or reactions to last week's session?

How was it for you to wait for the results?

In the last session we discussed some of your risks for HIV and hepatitis , which were. . .

We came up with a risk reduction step for you to try before today's clinic visit. How did that go for you?

How did the action you took feel for you?

Were you comfortable with how it went?

Identify supports and barriers to the risk reduction step

What parts of the plan worked best?

Which parts of the plan were challenging?

What stopped you? What made it difficult?

What were you feeling/thinking?

What would make it easier for you?

If it didn't work, where did you have trouble?

Problem-solve issues concerning the plan

Let's talk about what you would do if something got in your way of completing the plan. What would be a good back-up plan?

Provide encouragement and support for patient's risk reduction efforts

As appropriate:

Sounds like you did a great job.

It's great you were able to do that.

I'm impressed with how you handled that.

You've really accomplished something for yourself.

Making a change takes time, it is great that you set a goal for yourself, that is the first step, lets see where you went wrong and try another approach

Revise Risk Reduction Plan

Revise and develop a new plan with the patient

What else could you try to further reduce your risk of getting HIV and hepatitis?

Now that you have your negative test result, what can you do to stay uninfected?

You did an excellent job with the first risk reduction plan. What more do you think you can do?

Identify challenging step or revise previous step

Remember trying to change a behavior is difficult and is best addressed in small steps.

Identify/clarify actions toward achieving step

Lets look at the issues that needed to be addressed to reduce your risk and complete your plan (list).

What do you need to do first, second, third?

Identify support for achieving step

Who can help support you as you try to reduce your risk?

Confirm with the patient that the plan is reasonable and acceptable

Now is this something you really feel you can do?

You need to feel like it will work for you. How does it feel? If we need to we can rework the plan.

Document the revised risk reduction plan with a copy to the patient

Just like before, we will write your plan down on the appointment card, we will include all the steps and actions needed to complete the plan.

Sometimes, looking at the plan can help you remember the steps, and help you see yourself completing the plan.

Identifying Sources of Support and Provide Additional Referrals

Address the longstanding or hard to manage issues contributing to risk

Your plan seems really good. But there are some important issues that contribute to your risk that may be best addressed with professional help or assistance.

Assess the patient's willingness to seek professional help and use a referral

Have you ever sought counseling or gone to a support group?

Evaluate what types of referral the patient would be most receptive to

Would you be more comfortable talking to an individual counselor, or going to a support group?

Since we've talked about (drug use, alcohol) affecting your risk, have you considered getting help in dealing with this?

What would be hardest about seeking support for (name the issue)?

Is there a particular type of support or service you would be willing to consider using?

Recognize the challenges of behavior change

As we discussed, this may be challenging.

Trying something new can sometimes feel a bit uncomfortable but it gets easier, feels more natural with practice.

Provide appropriate referrals

We talked about an agency (name) that you could call to receive help with (name) the issue that is contributing to your risk behavior.

Do you feel comfortable doing this? Are there any questions I can answer?

Provide Appointment Card/Reminder for follow-up

Review with the patient the importance of getting test results

Now we need to schedule an appointment for you to come back in 2 weeks to get your test results.

Identify mechanisms for the patient to remember follow-up events

What would help you remember and keep these appointments?

Do you keep a date book or calendar?

Review patient and counselor contact information

Your next appointment with us is (day/date/time).

Let me just make sure that you know how to contact me should your need to.

Let me be sure I know how to reach you (review address/phone number).

Is this a good way to contact you?

Two Session Counseling Protocol: Session II [HCV-, HIV-]

| Protocol Component | Time-Minutes |
|---------------------------|---------------------|
|---------------------------|---------------------|

| | |
|-----------------------------|--|
| Provide Test Results Review | |
|-----------------------------|--|

| | |
|----------------------------|--|
| Review Risk Reduction Plan | |
|----------------------------|--|

| | |
|----------------------------|--|
| Revise Risk Reduction Plan | |
|----------------------------|--|

| | |
|--|--|
| Identify Sources of Support and Provide Additional Referrals | |
|--|--|

| | |
|---|--|
| Provide Appointment Card/Reminder for Follow-up | |
|---|--|

| | |
|-------------------|--|
| Total Time | |
|-------------------|--|

| |
|-----------|
| 30 |
|-----------|

Provide Test Results- HCV Negative, HIV, Negative

Provide results clearly and simply

Let's look at your test result, and then we'll talk about how best to understand the result.

The test result is negative for HIV, which means you have not been infected with HIV.

The test result is negative for hepatitis C, which means you have not been infected with hepatitis C.

Review meaning of the results

This means that as of less than 3 months ago, which would be before (month), you were not infected with HIV or hepatitis C.

However, this result does not tell us about any exposure you may have had in the past 3 months.

Assess patient's reaction to results

How does it feel to hear that it is very likely that you are not infected with HIV and hepatitis C?

What does this result mean to you?

Note the need to consider the test result in reference to most recent risk exposure

Given you had an exposure last week (insert exposure here, sharing needles) you may want to consider another test in the next six weeks, by (date).

Is this something you want to do, get tested again? Where would you go for this?

Enroll client in study

If patient is randomized to research group, explain that you will be seeing him/her again in ??? to follow-up on how risk reduction is going

Review the Risk Reduction Plan

Assess the patient's process in trying out the risk reduction plan

What were your thoughts or reactions to last week's session?

How was it for you to wait for the results?

In the last session we discussed some of your risks for HIV and hepatitis , which were. . .

We came up with a risk reduction step for you to try before today's clinic visit. How did that go for you?

How did the action you took feel for you?

Were you comfortable with how it went?

Identify supports and barriers to the risk reduction step

What parts of the plan worked best?

Which parts of the plan were challenging?

What stopped you? What made it difficult?

What were you feeling/thinking?

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If it didn't work, where did you have trouble?

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Provide appropriate referrals

We talked about an agency (name) that you could call to receive help with (name) the issue that is contributing to your risk behavior.

Do you feel comfortable doing this? Are there any questions I can answer?

Provide Appointment Card/Reminder for follow-up

Review study follow-up schedule with the patient

There are ? more appointments for you to complete this study(???)

Identify mechanisms for the patient to remember follow-up events

What would help you remember and keep these appointments?

Do you keep a date book or calendar?

Review patient and counselor contact information

Your next appointment with us is (day/date/time).

Let me just make sure that you know how to contact me should your need to.

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